



Corporate Office
 952 Frederick Street
 Hagerstown, MD 21740

301.733.2000 phone
 800.638.3508 toll free
 301.790.3529 fax

www.hbp.com

ACCOUNT INFORMATION SHEET — CREDIT APPLICATION

Name _____ Phone (____) ____ - _____

Address _____ FAX (____) ____ - _____

_____ D & B # _____

I/We/Our firm request(s) an open credit line with HBP, Inc. as a convenience in purchasing, and submit the below references, whom you may consult, and information relative to me/us/our firm.

I. BANK REFERENCES Account Number _____ Contact Person _____

Name of Bank (Branch)	Phone Number	Fax Number
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II. TRADE REFERENCES

NAME	PHONE NUMBER	FAX NUMBER	ACCOUNT #
(1) _____	(____) ____ - _____	(____) ____ - _____	_____
(2) _____	(____) ____ - _____	(____) ____ - _____	_____
(3) _____	(____) ____ - _____	(____) ____ - _____	_____
(4) _____	(____) ____ - _____	(____) ____ - _____	_____

III. GENERAL INFORMATION

Business Started _____ Type of Business _____

Form of Ownership: Individual _____ Partnership _____ Corporation _____ Association _____

Credit Limit Requested \$ _____ Purchase Order Required? Yes _____ No _____

Invoice to the Attn of: _____ Title _____

Method of Shipment Desired _____ Shipping Address if Different _____

Taxable: ___ Tax Exempt: ___ MD PA VA WV DC Is a copy of exemption certificate attached? Yes ___ No ___

TERMS: 1% 10 Days, Net 30 Days

We the undersigned agree to pay HBP within the terms of the invoice. By affixing the signature below, the undersigned, or if corporation, the corporate officer (agent), agrees that HBP shall be paid its necessary and responsible costs and expenses incurred, including a reasonable attorney's fee due to litigation arising out of collection of any unpaid amounts owing by customer. Customer agrees to pay to HBP a late charge, in an amount equal to 1 ½% per month of the total amount of any late payment. This form must be signed by an authorized officer or representative to establish credit.

The undersigned does hereby declare under the penalty of perjury that the contents of this credit application are true to the best of the knowledge, information and belief of the undersigned applicant.

By: _____ Title _____ Date _____

Account Manager _____ Project Manager _____

Accepted By: _____ Date _____

Open Limit \$ _____ Customer Number _____